

AO 433 (Rev. 04/11)		Administrative Office of the United States Courts Document Page 1 of 1		FOR COURT USE ONLY <b>DUE DATE:</b>	
<b>TRANSCRIPT ORDER</b>					
<i>Please Read Instructions:</i>					
1. NAME <b>J. Ryan Sims</b>		2. PHONE NUMBER <b>(202) 879-3603</b>		3. DATE <b>12/20/2017</b>	
4. MAILING ADDRESS <b>51 Louisiana Ave NW</b>		5. CITY <b>Washington</b>		6. STATE <b>DC</b>	7. ZIP CODE <b>20001</b>
8. CASE NUMBER <b>17-03283</b>	9. JUDGE <b>Laura T. Swain</b>	DATES OF PROCEEDINGS 10. FROM <b>12/20/2017</b> 11. TO <b>12/20/2017</b>			
12. CASE NAME <b>In re Commonwealth of Puerto Rico</b>		LOCATION OF PROCEEDINGS 13. CITY <b>SDNY-New York</b> 14. STATE <b>New York</b>			
15. ORDER FOR <input type="checkbox"/> APPEAL <input type="checkbox"/> CRIMINAL <input type="checkbox"/> CRIMINAL JUSTICE ACT <input checked="" type="checkbox"/> BANKRUPTCY <input type="checkbox"/> NON-APPEAL <input type="checkbox"/> CIVIL <input type="checkbox"/> IN FORMA PAUPERIS <input type="checkbox"/> OTHER					
16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)					
PORTIONS		DATE(S)		PORTION(S)	
<input type="checkbox"/> VOIR DIRE				<input type="checkbox"/> TESTIMONY (Specify Witness)	
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)					
<input type="checkbox"/> OPENING STATEMENT (Defendant)					
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)				<input type="checkbox"/> PRE-TRIAL PROCEEDING (Specy)	
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)					
<input type="checkbox"/> OPINION OF COURT					
<input type="checkbox"/> JURY INSTRUCTIONS				<input checked="" type="checkbox"/> OTHER (Specify)	
<input type="checkbox"/> SENTENCING				<b>Entire Transcript of Hearing</b>	
<input type="checkbox"/> BAIL HEARING				<b>12/20/2017</b>	
17. ORDER					
CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE	COSTS
ORDINARY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
14-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
EXPEDITED	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NO. OF COPIES <b>1</b>		
DAILY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>			
CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional).				ESTIMATE TOTAL	<b>0.00</b>
18. SIGNATURE <b>/s/ Christopher DiPompeo</b>				PROCESSED BY	
19. DATE <b>12/20/2017</b>				PHONE NUMBER	
TRANSCRIPT TO BE PREPARED BY				COURT ADDRESS	
ORDER RECEIVED		DATE	BY		
DEPOSIT PAID				DEPOSIT PAID	
TRANSCRIPT ORDERED				TOTAL CHARGES	<b>0.00</b>
TRANSCRIPT RECEIVED				LESS DEPOSIT	<b>0.00</b>
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT				TOTAL REFUNDED	
PARTY RECEIVED TRANSCRIPT				TOTAL DUE	<b>0.00</b>